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										ess it displays a valid OMB control number Application or Docket/Number		
	Substitute for Form PTO-875									10/010633		
L	CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OF	OTH	ER THAN L ENTITY	
 -	FOR NUMBER FILED				D NI	JMBER EXTRA	RATE	FFF	7		- CIVIIII	
((37 CFR 1.16(a))					- KAIE	FEE	\dashv	RATE	FEE		
Ţ (S	TOTAL CLAIMS (37 CFR 1.16(c))			minus	20 = .		┪	<u> </u>	OR		\$	
16	IDEPENDENT CL 7 CFR 1.16(b))	<u> </u>				× \$=	:	OR	X \$=			
<u> </u>	JLTIPLE DEPENDENT CLAIM PRESE			minus 3 = *			X \$=		OR	X \$=		
					(37 CFR 1.16(d)		+ \$=		OR	+ \$=		
	* If the difference in column 1 is less than zero, enter "0" in column 2.								OR	TOTAL		
	CLAIMS AS AMENDED - PART II											
			lumn 1)		(Column 2	2) (Column 3)	SMALL	ENTITY	OR	OTHE	R THAN	
AMENDMENT A	(Q) 20 C AM		LAIMS MAINING IFTER NDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT LY EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
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	Independent (37 CFR 1.16(b))	<u> </u>	10	Minus	7		x \$ =		OR	× \$=		
_ 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							 	OR	X \$=	<u> </u>	
							TOTAL		OR	+ \$ =	<u> </u>	
		(Colu	ımn 1)		(Column 2	; (O=1,	ADD'L FEE	Ii	OR	ADD'L FEE		
AMENDMENT B		CL REM AF	AIMS AINING TER IDMENT		(Column 2 HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
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_		(Colur			(Column 2)	(Column 3)				_		
칻		REMA	IMS INING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total (37 CFR 1.16(c))			Minus	**	=	× \$ =	166			FEE	
	Independent (37 CFR 1.16(b))	*		Minus	### ·	8	X \$ =		OR	X \$=		
٤	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$ =		OR	X \$=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Proviously Paid For It Not Town 1.												
***	If the "Highest N	umber Pr	eviously P	aid Eod. 13	N THIS SPACE	le "0" in column 3. is less than 20, en is less than 3, ente ent) is the highest				<u> </u>		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.